## PART B - FEE(S) TRANSMITTAL and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000 or Fax TRUCTIONS in form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed when the correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address corrected below or directed otherwise in Block I, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m 21495 7590 08502/2004 have its own certificate of mailing or transmission. CORNING CABLE SYSTEMS LLC Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for first class mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below. P O BOX 489 HICKORY, NC 28603 10/29/2004 HDEMESS2 00000051 500425 10016316 <u>McFarland</u> 1370.00 DA 01 FC:1501 (Signat 300.00 DA 02 FC:1504 Œ APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/016,316 12/10/2001 Bernhard A.M. Deutsch SI01-019 4752 TITLE OF INVENTION: LIGHTWAVE GUIDE CABLE AND PROCESS FOR CARRYING AN OPTICAL SIGNAL, ESPECIALLY WITH RESPECT TO MULTIP **WAVEGUIDE TECHNIQUES** APPLN. TYPE SMALL ENTITY ISSUE FEE PUBLICATION FEE TOTAL FEE(S) DUE DATE DUE NO nonprovisional \$1330 \$300 \$1630 11/02/2004 **EXAMINER** ART UNIT **CLASS-SUBCLASS** PRASAD, CHANDRIKA 2839 385-100000 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363). (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, $\hfill \square$ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. listed, no name will be printed.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

CCS Technology, Inc.	Wilmington, Dglaware
Please check the appropriate assignee category or categories (will not	be printed on the patent); . $\square$ individual $X_{\square}$ corporation or other private group entity $\square$ governm
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